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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines STRAIGHT TALK AMERICA PO Box 9785 ADDRESS (number and street) Check if different than previously **ALEXANDRIA** ۷A 22304 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00413245 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 06 0 1 2007 06 30 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Keith Davis Type or Print Name of Treasurer Electronically Filed by Keith Davis 07 20 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

Image# 27930995365

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

	STRAIGHT TALK AMERICA		
F	Report Covering the Period: From:	01 2007	To: 0 6 3 0 2 0 0 7
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 Yellow 2007		33386.58
	(b) Cash on Hand at Begining of Reporting Period	7884.55	
	(c) Total Receipts (from Line 19)	10083.00	98888.39
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	17967.55	132274.97
7.	Total Disbursements (from Line 31)	2656.79	116964.21
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	15310.76	15310.76
9.	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	10525.86	
10.	Debts and Obligations owed BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	215133.97	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

STRAIGHT TALK AMERICA

0 1 3^D0 м м 0 6 м м 0 6 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 54000.00 (i) Itemized (use Schedule A) 83.00 2687.38 (ii) Unitemized (iii) TOTAL (add 83.00 56687.38 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 10000.00 25000.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 10083.00 81687.38 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 9.60 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 17191.41 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 10083.00 98888.39 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 10083.00 98888.39 (subtract Line 18(c) from Line 19)

32. Total Federal Disbursements

from Line 31).....

(subtract Line 21(a)(ii) from Line 30(a)(ii)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 9906.79 134614.21 Expenditures..... (c) Total Operating Expenditures 9906.79 134614.21 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... -7500.00 0.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 100.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 100.00 (add Lines 28(a), (b), and (c)) -7250.00 -10250.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 2656.79 116964.21 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

2656.79

116964.21

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	10083.00	81687.38
34.	Total Contribution Refunds (from Line 28(d))	0.00	100.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	10083.00	81587.38
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	9906.79	134614.21
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	9.60
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	9906.79	134604.61

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS y information copied from such Reports and State for commercial purposes, other than using the nature of the commercial purposes.	ements may ame and add	Use separate schedule(s) or each category of the Detailed Summary Page not be sold or used by any persoress of any political committee to	FOR LINE NUMBER: PAGE 6 / 29 (check only one) 11a 11b X 11c 12 13 14 15 16 17 If or the purpose of soliciting contributions solicit contributions from such committee.								
\rangle	STRAIGHT TALK AMERICA											
Α.	Full Name (Last, First, Middle Initial) COMMERCE, HOPE, INNOVATION & PROGRESS Mailing Address 8580 Beaverwood Drive	S PAC		Date of Receipt								
	City	State	Zip Code	0 6 2 7 2 0 0 7 Transaction ID: SA11C.97517								
	Germantown	TN	38138	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C C00	427286	5000.00								
	Name of Employer Occupation			Contribution								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00									
В.	Full Name (Last, First, Middle Initial) SCIENCE APPLICATIONS INTERNATIONAL COR	PORATION V	OLUNTARY POLITICAL ACTION C	OMM Date Eof Receipt								
	Mailing Address 10260 Campus Point Dr # F2			06 28 2007								
	City	State	Zip Code	Transaction ID: SA11C.97510								
	San Diego	CA	92121	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C C00	300418	5000.00								
	Name of Employer Occupation			- Contribution								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00									

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NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA											
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\rangle	NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
۹.	Full Name (Last, First, Middle Initial) US Postal Service				Date of Disbu	
	Mailing Address 1100 Wythe Street				06 4	D 2 1 Y 2 0 0 7 Y
	City Alexandria		p Code 2314		Amount of Ea	ach Disbursement this Period
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	Office Sought: House Senate President State: District:	Primary Other (specify)	General ▼	Туре	[MEMO ITE	M]
3.	Full Name (Last, First, Middle Initial) Care First Blue Cross Blue Shield				Date of Disbu	
	Mailing Address PO Box 79749				0 6	21 / 2007
	City Baltimore		p Code 1279		Amount of Ea	ach Disbursement this Period
	Purpose of Disbursement Health Insurance Candidate Name			001 Category/		460.00
	Office Sought: Senate President State: Disbut	sement For: Primary Other (specify)	General ▼	Туре		
Э.	Full Name (Last, First, Middle Initial) David Denton				Date of Disbu	
	Mailing Address PO Box 203636				06 /	30 4 2007
	City New Haven		p Code 6520		Amount of Ea	ach Disbursement this Period
	Purpose of Disbursement Check Voided/Originally issued 5/31/06 Candidate Name			001 Category/		-126.00
	Office Sought: House Disbut Senate President State: District:	Primary Other (specify)	General ▼	Туре		
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SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE	PAGE 10 / 29									
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 2	3 24 25 26 8b 28c 29 30b								
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NAME OF COMMITTEE (In Full)	·											
STRAIGHT TALK AMERICA												
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City Topeka												
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Purpose of Disbursement Check Voided/Originally issued 5/1/06 Candidate Name		Cat	001 egory/		•			-	·500.0	00
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	1	ype							
Full Name (Last, First, Middle Initial) Lowndes County Republican Party				Dat	e of D	isburse	SB29.9			
Mailing Address PO Box 389				0	6 ^M	[/] 3	0 /	ž	0 ŏ 7	Y
City Ft. Deposit	State Zip Code AL 36032			Am	ount o	of Each	Disburs		t this P	
Purpose of Disbursement Check Voided/Originally issued 6/13/06 Candidate Name		Cat	011 egory/ ype		•	•			300.0	,
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)									
Full Name (Last, First, Middle Initial) Lucas for State House				_		ion ID:	SB29.9	9750	6	
Mailing Address 2856 Kellytown Road				0	6 ^M	[′] 3	0 /	^Y 2	0 ŏ 7	Y
City Hartsville	State Zip Code SC 29550			Am	ount o	of Each	Disburs	ement	t this P	eriod
Purpose of Disbursement Check Voided/Originally issued 6/29/06		O)11					-	250.0	00
Candidate Name			egory/ ype							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)									
SUBTOTAL of Disbursements This Page (optional)			▶					-12	250.0	0
TOTAL This Period (last page this line number only)			. •							

TEMES DISPUSSEMENTS	Use seperate schedule(s)		check or				[F.	AGE	14/2	.9	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	F	21b 27	\Box 2	22 28a	23 28b	24 28c	X	25 29	Н	26 30b
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or for commercial purposes, other than using the nam	e and address of any political co	omm	ittee to s	olicit	contrib	utions fr	om such	comn	nittee		
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA											
Full Name (Last, First, Middle Initial)				Т	ransa	ction ID:	SB29.9	749	 8		
Marion County Republican Party				Г	M M	Disburs	ement	ΥΫ́Υ	0 ŏ 7	Υ	
Mailing Address PO Drawer 1945				L	0 6] [3	3 0	. 2	007		
City Hamilton	State Zip Code AL 35570			Α	mount	of Each	Disburs	emen	t this P	erio	b
Purpose of Disbursement	I		-					-	500.0	0	
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Candidate Name			gory/ pe								
	ement For:										
Senate President	Primary General Other (specify) ▼										
State: District:	• · · · · · (• · · · · · · · · · · · · ·										
Full Name (Last, First, Middle Initial)				Т	ransa	ction ID:	: SB29.9	9750	4		
 Pickens County GOP 					ate of	Disburs					
Mailing Address 106 Hyde Lane				[06	/ D3	3 D /	Ý Ž	0 ŏ 7	Y	
City Clemson	State Zip Code SC 29631			Δ	mount	of Each	Disburs	emen	t this P	erio	d
Purpose of Disbursement	29031		'	[-1	000.0	0	
Check Voided/Originally issued 6/29/06 Candidate Name		0 Cate	11 gory/								
		Ту	pe								
Office Sought: House Disburs Senate	ement For: Primary General										
President	Other (specify)										
State: District:	(-p), \										
Full Name (Last, First, Middle Initial)				Т	ransa	ction ID:	: SB29.9	9750	5		
Southern Beaufort County GOP Women						Disburs	ement				
Mailing Address 88 South Port Royal Driv	/e				06	/ D3	30 /	ž	0 ŏ 7	Y	
City	State Zip Code			A	mount	of Each	Disburs	emen	t this P	erio	d
Hilton Head Island Purpose of Disbursement	SC 29928	_		- [•	• • •	-	500.0	00	
Check Voided/Originally issued 6/29/06		Ō.	11	"							
Candidate Name		Cate Ty	gory/ pe								
	ement For:										
Senate	Primary General										
State: District:	Other (specify)										
				-				-		_	_
SUBTOTAL of Disbursements This Page (optional)		<u></u>	<u> </u>					-2	0.000	0	
TOTAL This Period (last page this line number only						•	• • •		•		

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	CHEDULE B (FEC Form 3	' Use sepe	erate schedule(s)		NUMBER:	PAGE 15/29
IT	EMIZED DISBURSEMENT		category of the	(check only		
		Detailed	Summary Page	27	22 23 28b	24 25 26 28c X 29 30b
	y Information copied from such Reports a					
or	for commercial purposes, other than using	g the name and addre	ss of any political	committee to so	olicit contributions from	such committee
\setminus	NAME OF COMMITTEE (In Full)					
17	STRAIGHT TALK AMERICA					
\mathbb{L}						
A.	Full Name (Last, First, Middle Initial)				Transaction ID: Si	
Α.	Steve Clouse Campaign				Date of Disburseme	
	Mailing Address PO Box 818				06 30	['] 2007
	a g a a a a a a a a a a a a a a a a a a					
	City	State	Zip Code		Amount of Each Dis	sbursement this Period
	Ozark	AL	36361			
	Purpose of Disbursement					-500.00
	Check Voided/Originally issued 6/13/06			011		
	Candidate Name			Category/		
		51.1		Туре		
	Office Sought: House	Disbursement For:				
	Senate President	Primary	General			
	State: District:	Other (spe	ecity) 🔻			
_						
В.	Full Name (Last, First, Middle Initial) Sumter County Republican Party				Transaction ID: SI	
-	Sumer County Republican Party				Date of Disburseme	
	Mailing Address PO Box 671				06 30	['] 2007
	City	State	Zip Code		Amount of Each Dis	sbursement this Period
	Livingston	AL	35470			500.00
	Purpose of Disbursement					-500.00
	Check Voided/Originally issued 6/13/06			011		
	Candidate Name			Category/		
	Office Cought: House	Dishurasment Fam		Туре		
	Office Sought: House Senate	Disbursement For: Primary	General			
	President	Other (spe				
	State: District:	Other (spe	;ciiy) ▼			
	Ciaic. District.				1	

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	-1000.00
TOTAL This Period (last page this line number only)	•	-7250.00

(Use separate schedule(s) for each

PAGE 16 / 29 FOR LINE NUMBER: (check only one)

X 9

Excluding Loans		numbered line)	10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debtor HEATHER WILSON FOR CONGRESS	or Creditor		ebt (Purpose): irfare and Lodg-
Mailing Address PO Box 14070			
City State Albuquerque NM	ZIP Code 87191		
Outstanding Balance Beginning This Period 454.80		Tra	nsaction ID: SD9.96368
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		454.80
B. Full Name (Last, First, Middle Initial) of Debtor Karen Floyd 2006 Campaign	or Creditor	Nature of D Travel-Air	ebt (Purpose): fare
Mailing Address 113 West Main Street			
City State Spartanburg SC	ZIP Code 29306		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD9.96364
791.23 Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
		Outstandin	-
0.00	0.00		791.23
C. Full Name (Last, First, Middle Initial) of Debtor MIKE DEWINE FOR US SENATE	or Creditor	Nature of D Travel-Air	ebt (Purpose): fare
Mailing Address PO Box 340188			
City State Columbus OH	ZIP Code 43234		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD9.96363
9279.83			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		9279.83
1) SUBTOTALS This Period This Page (optional)		>	10525.86
2) TOTALS This Period (last page this line number of	only)	>	10525.86
3) TOTALS OUTSTANDING LOANS from Schedu	lle C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page only)	_ >	

(Use separate schedule(s) for each

PAGE 17 / 29

FOR LINE NUMBER:		
(check only one)		9
	Х	10

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debtor American Express	or Creditor		ebt (Purpose): Services (Disput- e)
Mailing Address PO Box 1270			
City State Newark NJ	ZIP Code 07101-1270		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97416
199.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	199.00		0.00
B. Full Name (Last, First, Middle Initial) of Debtor Campaign Solutions	or Creditor	Nature of D Website E	ebt (Purpose): Expense
Mailing Address 118 North Saint Asaph St.			
City State Alexandria VA	ZIP Code 22314		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97432
62.18			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		62.18
C. Full Name (Last, First, Middle Initial) of Debtor Caplin & Drysdale	or Creditor	Nature of D Consultar	ebt (Purpose): nt-Legal
Mailing Address One Thomas Circle, NW St	e. 1100		
City State Washington DC	ZIP Code 20005		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97158
3006.40			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		3006.40
1) SUBTOTALS This Period This Page (optional)		•	3068.58
2) TOTALS This Period (last page this line number o	nly)	>	
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	- b	

(Use separate schedule(s) for each

PAGE 18 / 29 FOR LINE NUMBER: (check only one)

Excluding Loans number			X 10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debtor or Caplin & Drysdale	Creditor	Nature of D Consultin	Debt (Purpose): ng-Legal
Mailing Address One Thomas Circle, NW Ste.	Mailing Address One Thomas Circle, NW Ste. 1100		
City State Washington DC	ZIP Code 20005		
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.97383
1017.91	Decree A This Deviced	O. data and	Control of Olympiat This Deviced
Amount Incurred This Period 0.00	Payment This Period 0.00		ing Balance at Close of This Period 1017.91
0.00	0.00		1017.31
B. Full Name (Last, First, Middle Initial) of Debtor or Caplin & Drysdale	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Caplin & Drysdale		
Mailing Address One Thomas Circle, NW Ste.	1100		
City State Washington DC	ZIP Code 20005		
Outstanding Balance Beginning This Period		 Tra	ansaction ID: SD10.97376
37.00			
Amount Incurred This Period	Payment This Period		ing Balance at Close of This Period
0.00	0.00)	37.00
C. Full Name (Last, First, Middle Initial) of Debtor or Caplin & Drysdale	Creditor	Nature of D Consultar	Debt (Purpose): nt-Legal
Mailing Address One Thomas Circle, NW Ste.	1100		
City State Washington DC	ZIP Code 20005		
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.97441
630.00			
Amount Incurred This Period	Payment This Period		ing Balance at Close of This Period
0.00	0.00)	630.00
1) SUBTOTALS This Period This Page (optional)		P	1684.91
2) TOTALS This Period (last page this line number only	2) TOTALS This Period (last page this line number only)		
3) TOTALS OUTSTANDING LOANS from Schedule (. •		
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only) >	

CHEDULE D (FEC Form 3X)		(Use separate	PAGE 19 / 29			
EBTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:			
cluding Loans		for each numbered line)	(check only one) 9 X 10			
AME OF COMMITTEE (In Full)			<u> </u>			
TRAIGHT TALK AMERICA						
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		ebt (Purpose):			
Connell Donatelli, Inc.		Email List	t Purchase			
Mailing Address PO Box 1877						
City State	ZIP Code					
Alexandria VA	22313					
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97377			
6725.00						
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period			
0.00	0.00	0	6725.00			
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		ebt (Purpose):			
Huckaby Davis Lisker		Consultin	g-Compliance			
Mailing Address 228 S. Washington St., St	uite 115					
City State	ZIP Code					
Alexandria VA	22314					
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97380			
2014.67						
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period			
0.00	0.00	0	2014.67			
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of D	ebt (Purpose):			
Huckaby Davis Lisker		Complian	ce Consultant			
Mailing Address 228 S. Washington St., St	uite 115					
City State	ZIP Code					
Alexandria VA	22314					
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97435			
1000.00						
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period			

1) SUBTOTALS This Period This Page (optional)	•				 	973	9.6	7	
2) TOTALS This Period (last page this line number only)	_ ▶	1	1						
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	-								
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	_ •				 				

0.00

1000.00

0.00

(Use separate schedule(s) for each

PAGE 20 / 29 FOR LINE NUMBER: (check only one) 9

Excluding Loans		numbered line)	X 10	
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA				
A. Full Name (Last, First, Middle Initial) of Debtor or Huckaby Davis Lisker	Creditor		ebt (Purpose): ce Consultant	
Mailing Address 228 S. Washington St., Suite	ailing Address 228 S. Washington St., Suite 115			
City State Alexandria VA	ZIP Code 22314			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97424	
1000.00 Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		1000.00	
B. Full Name (Last, First, Middle Initial) of Debtor or IDMI	Creditor		ebt (Purpose): File Maintenance	
Mailing Address 490 White Pond Drive				
City State Akron OH	ZIP Code 44320			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97381	
2972.77 Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		2972.77	
C. Full Name (Last, First, Middle Initial) of Debtor or IDMI	Creditor		ebt (Purpose): File Maintenance	
Mailing Address 490 White Pond Drive				
City State Akron OH	ZIP Code 44320			
Outstanding Balance Beginning This Period 140.00		Tra	nsaction ID: SD10.97427	
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		140.00	
1) SUBTOTALS This Period This Page (optional)		. •	4112.77	
2) TOTALS This Period (last page this line number only	/)	>		
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	>		

(Use separate schedule(s) for each

PAGE 21 / 29 FOR LINE NUMBER: 9 (check only one)

Excluding Loans num			numbered line)	X 10
NAME OF C	COMMITTEE (In Full) Γ TALK AMERICA			
A. Full N	Name (Last, First, Middle Initial) of Debto	r or Creditor		ebt (Purpose): File Maintenance
Mailing A	address 490 White Pond Drive			
City Akron	State OH	ZIP Code 44320		
Outsta	anding Balance Beginning This Period 50052.14		Tra	nsaction ID: SD10.97426
	Amount Incurred This Period 0.00	Payment This Period 0.00	-	ng Balance at Close of This Period 50052.14
B. Full N	Name (Last, First, Middle Initial) of Debto	r or Greditor		ebt (Purpose): File Maintenance
Mailing A	address 490 White Pond Drive			
City Akron	State OH	ZIP Code 44320		
Outsta	anding Balance Beginning This Period		Tra	nsaction ID: SD10.97479
	0.00			
	Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
	140.00	0.00		140.00
C. Full N	Name (Last, First, Middle Initial) of Debto	r or Creditor		ebt (Purpose): File Maintenance
Mailing A	address 490 White Pond Drive			
City Akron	State OH	ZIP Code 44320		
Outsta	anding Balance Beginning This Period 0.00		Tra	nsaction ID: SD10.97484
	Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
	720.34	0.00		720.34
1) SUBTOT	TALS This Period This Page (optional).		•	50912.48
2) TOTALS	2) TOTALS This Period (last page this line number only)			
3) TOTALS	OUTSTANDING LOANS from Sched	ule C (last page only)	>	
4) ADD 2)	and 3) and carry forward to appropriate	line of Summary Page (last page only)	>	

(Use separate schedule(s) for each numbered line)

PAGE 22 / 29 FOR LINE NUMBER: 9 (check only one) X 10

Excluding Loans	numbered line)	1
NAME OF COMMITTEE (In Full)		
STRAIGHT TALK AMERICA		

	ME OF COMMITTEE (In Full) RAIGHT TALK AMERICA		
	A. Full Name (Last, First, Middle Initial) of Debtor or Courtney Nahigian	Nature of Debt (Purpose): Salary	
	Mailing Address 331 Cameron Station Blvd.		
	City State Alexandria VA	ZIP Code 22304	
	Outstanding Balance Beginning This Period		Transaction ID: SD10.97423
	3201.90		
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	0.00	0.00	3201.90
	B. Full Name (Last, First, Middle Initial) of Debtor or Courtney Nahigian	Creditor	Nature of Debt (Purpose): Salary
	Mailing Address 331 Cameron Station Blvd.		
	City State Alexandria VA	ZIP Code 22304	
	Outstanding Balance Beginning This Period		Transaction ID: SD10.97485
	0.00		
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	3201.90	0.00	3201.90
	C. Full Name (Last, First, Middle Initial) of Debtor or Paula Y. Edwards, CPA	Creditor	Nature of Debt (Purpose): Consulting-Compliance
	Mailing Address 1200 G Street, N.W. Suite 800		
	City State Washington DC	ZIP Code 20005	
	Outstanding Balance Beginning This Period		Transaction ID: SD10.97480
	0.00		
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	1225.00	0.00	1225.00
1)	SUBTOTALS This Period This Page (optional)		▶ 7628.80
2)	TOTALS This Period (last page this line number onl	у)	>
3)	TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>
4)	ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	>

(Use separate schedule(s) for each

PAGE 23 / 29 FOR LINE NUMBER: (check only one)

excluding Loans num		numbered line)	X 10	
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paychex		Employe	Nature of Debt (Purpose): Employer Contribution Pay- roll Taxes	
Mailing Address 7450 Tilghman St., Ste. 107	7			
City State Allentown PA	ZIP Code 18106-9037			
Outstanding Balance Beginning This Period 1642.35		Tra	ansaction ID: SD10.97428	
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period	
0.00	0.00		1642.35	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paychex		Nature of Employe roll Taxes	Nature of Debt (Purpose): Employer Contribution Pay- roll Taxes	
Mailing Address 7450 Tilghman St., Ste. 107				
City State Allentown PA	ZIP Code 18106-9037			
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.97481	
0.00 Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period	
1642.35	0.00		1642.35	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard Quinn & Associates			Nature of Debt (Purpose): Consultant-Polling	
Mailing Address 1600 Gervais Street				
City State Columbia SC	ZIP Code 29201			
Outstanding Balance Beginning This Period 26725.00		Tra	ansaction ID: SD10.97204	
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period	
0.00	0.00		26725.00	
1) SUBTOTALS This Period This Page (optional)		•	30009.70	
2) TOTALS This Period (last page this line number only)		- - -		
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	 		
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	-		

(Use separate schedule(s) for each

PAGE 24 / 29 FOR LINE NUMBER: 9 (check only one)

Excluding Loans		numbered line)	X 10	
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southwest Publishing and Mailing Corp.			Nature of Debt (Purpose): Direct Mail-Postage/Production	
Mailing Address 2600 NW Topeka Blvd.				
City State Topeka KS	ZIP Code 66617			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.86868	
65843.20 Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	8540.69	-	57302.51	
B. Full Name (Last, First, Middle Initial) of Debtor Southwest Publishing and Mailing Corp.	or Creditor		ebt (Purpose): il-Postage/Produ-	
Mailing Address 2600 NW Topeka Blvd.				
City State Topeka KS	ZIP Code 66617			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.96351	
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		16648.18	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southwest Publishing and Mailing Corp.			Nature of Debt (Purpose): Direct Mail-Postage/Production	
Mailing Address 2600 NW Topeka Blvd.				
City State Topeka KS	ZIP Code 66617			
Outstanding Balance Beginning This Period 0.00		Tra	nsaction ID: SD10.97482	
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
9770.77	0.00		9770.77	
1) SUBTOTALS This Period This Page (optional)		•	83721.46	
2) TOTALS This Period (last page this line number only)				
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	>		
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	-		

(Use separate schedule(s) for each

PAGE 25 / 29 FOR LINE NUMBER: (check only one) 9

NAME OF	COMMITTEE (In Full)
STRAIGH	HT TALK AMERICA

Excluding Loans		numbered line)	X 10		
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Telecommunications			Nature of Debt (Purpose): Telemarketing		
Mailing Address 7591 9th Street North					
City State Oakdale MN	ZIP Code 55128				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.96353		
20822.60					
Amount Incurred This Period	Payment This Period Outstanding Balance at Close of		ng Balance at Close of This Period		
0.00	0.00		20822.60		
B. Full Name (Last, First, Middle Initial) of Debto Strategic Telecommunications	r or Creditor	Nature of D Telemark	ebt (Purpose): eting		
Mailing Address 7591 9th Street North					
City State Oakdale MN	ZIP Code 55128				
Outstanding Balance Beginning This Period Transaction ID: SD10.97483			nsaction ID: SD10.97483		
0.00					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
2233.00	0.00		2233.00		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor T&M Protection Resources		Nature of D Security	Nature of Debt (Purpose): Security		
Mailing Address 42 Broadway, Ste. 1630					
City State New York NY	ZIP Code 10004				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97161		
1200.00					
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of This Period		
0.00	0.00		1200.00		
1) SUBTOTALS This Period This Page (optional)			24255.60		
		>			
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)					
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)	-			

(Use separate schedule(s)

PAGE 26 / 29 FOR LINE NUMBER:

DEBTS AND OBLIGATIONS			for each (check only one) 9		
		numbe	red line)	, ,	X 10
NAME OF COMMITTEE (In Full)					
STRAIGHT TALK AMERICA					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Postal Service			Nature of Debt (Purpose): Postage		
			Ü		
Mailing Address 1100 Wythe Street					
City State Alexandria VA	ZIP Code 22314				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.974	130
118.00					
Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period		
0.00	118.00	-			0.00
0.00	110.00	0			0.00
1) SUBTOTALS This Period This Page (optional)	1) SUBTOTALS This Period This Page (optional).				0
				215133.9	7
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)					
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only	,) •			

Image# 27930995390

Form/Schedule: **F3XN**Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures disclosed on Schedule B, Line 21b were made on behalf of any specifically identified federal candidate. All expenditures made on behalf of a specifically identified federal candidate have been disclosed on Schedule B, Line 23. 11 CFR 104.3 (b) and 106.1 2) No expenditures disclosed on Schedule B, Line 21b were made for public communications (as defined by 11 CFR 100.26) or voter drive activity (under 11 CFR 106.6(b)(2)(i)) containing express advocacy as defined under 11 CFR 100.22 and thus did not constitute in-kind contributions or independent expenditures. 3) The committee has reviewed all travel and subsistence expenditures, and reviewed the reporting requirements outlined at 11 CFR 104.9 and in the instructions for Schedule B. There is no further itemization required under any Commission regulation for these expenditures.

Form/Schedule: SB21B Ultimate Vendor - American Express Merchant Services

Transaction ID: SB21B.97467

Image# 27930995391



Image# 27930995	392	
Form/Schedule: SD10 Transaction ID: SD10.97416	Disputed charge on May American Express bill.	Credit issued in June, 2007.